



POLYGRAPHED
APR 27 2019

NOTICE OF DEFERRED RFA

Date: 04/22/2019

Requesting provider: Patrick O Lang, MD
Address: 601 Van Ness Ave., #2018
City, State, Zip: San Francisco, CA 94102

Re: Jonathan Shockley
Employer: Biotelemetry, Inc.
Claim No.: 040519008736
Date of Injury: 02/15/2019

Dear Provider,

Chubb Corporation administers the above claim. Your **Request for Authorization is deferred** in accordance with California Code of Regulations 9792.9.1 (3)(b).

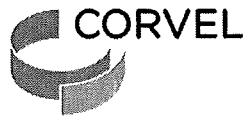
Receipt Date: 04/15/2019
Service(s) Request: Hand Therapy

Reason: RFA form is required with all treatment request, please resubmit with RFA form.

Note to Employee: disputes regarding the above shall be resolved either by agreement of the parties or through the dispute resolution process of the Worker's Compensation Appeals Board. You have a right to disagree with decision affecting your claim. If you have questions about the information in this notice, please call me (213) 612-0880. However, if you are represented by an attorney, please contact your attorney. For information about the worker's compensation claims process and your rights and obligation, go to www.dwc.ca.gov or contact an information and assistance (I&A) officer of the Division of Worker's Compensation. For recorded information and a list of offices, call toll-free 1-800-736-7401.

Sincerely,

Mario Castro
Claims Specialist



ELECTRONIC PROOF OF SERVICE

I am a citizen of the United States and a resident of the County of Washington; I am employed by CorVel Corporation, am over the age of eighteen years and not a party to the within entitled action; my business address is 111 SW 5th Avenue, Suite 200, Portland, Oregon, 97204.

I am readily familiar with CorVel's practice for electronic service of correspondence that is maintained on CorVel's electronic database.

On April 22, 2019, the within letter(s) were served on the parties in said action, by sending a true copy thereof **electronically** (facsimile) on the following parties:

Erika.Perez@Chubb.com
Email: Erika.Perez@Chubb.com

Patrick O Lang, MD
Fax: (415) 359-1925

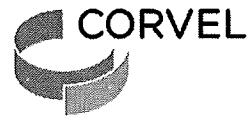
Executed on April 22, 2019, at Portland, Multnomah County, Oregon, 97204.

I, Linda Grant, declare under penalty of perjury, under the laws of the **STATE OF OREGON**, that the foregoing is true and correct.

A handwritten signature in black ink, appearing to read "Linda A. Grant".

Signature

File: 139249073 Shockley



PROOF OF SERVICE BY MAIL

I am a citizen of the United States and a resident of the County of Clark; I am employed by CorVel Corporation, am over the age of eighteen years and not a party to the within entitled action. My business address is 4120 SE International Way, Suite A108, Milwaukie, OR 97222. I am readily familiar with CorVel's practice for collection and processing of correspondence maintained on CorVel's electronic database for mailing with the U. S. Postal Service. Under such practice, correspondence that is printed for mail service would be put in a sealed envelope with postage thereon fully prepaid and placed for collection and mailing on the same date by depositing such with the U.S. postal service in the ordinary course of business.

On April 22, 2019, the within letter(s) were served on the parties in said action, by placing a true copy thereof enclosed in a sealed envelope, with postage thereon fully prepaid addressed as follows:

Farber & Co
333 Hegenberger Road #504

Oakland
CA
94621

Jonathan Shockley
1000 Sutter St.
San Francisco
CA
94109

Patrick O Lang, MD
601 Van Ness Ave., #2018
San Francisco
CA
94102

Executed on April 22, 2019 at Milwaukie, OR 97222.



I, Becca Guimont, declare under penalty of perjury, under the laws of the **STATE OF OREGON**, that the foregoing is true and correct.

A handwritten signature in black ink that reads "Becca Guimont".

Signature

File: 040519008736, Shockley Jonathan